DECLARATION AND POWER OF ATTORNEY

Docket No.: 331.1045

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

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COUPL									
the spec	cification of which	(check o	ne)						
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	was filed on	as	Application Serial	No.	and was an	nended on	(if applicable).		
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							enscification incl	uding the	claims, as
amende I ackno defined I hereb	ed by any amendi wledge the duty t in Title 37, Code by claim foreign	ment refe o disclose of Feder priority	d and understand the street to above. e all information the sal Regulations, §1 benefits under Title tor's certificate lists accretificate having	at is kn .56. tle 35,	own to me t	o be material to to	the patentability of of any foreign	of this app and/or n and/or	plication as provisional provisional
PRIOR	APPLICATION(S	3)						Priority cl	laimad
DE 102	2 32 286.4		1	ermany		8 July 2002 Day/Month/Year File	4	Yes	No
Number			Co	untry		Jay/Nortal/Tear Tile		Priority cl	laimed
Number			Co	ountry	C	Day/Month/Year File	d	Yes	No
		efit under	Title 35, United Seach of the claims	States (Code, §120 application is	of any United S	tates application	(s) listed States at	below and, pplication in to disclose

the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

the prior application and the national of 1 of lines		
Application Serial Number	Day/Month/Year Filed	Status
Application Serial Number	Day/Month/Year Filed	Status

And I hereby appoint Clifford M. Davidson, Reg. No. 32,728, Leslye B. Davidson, Reg. No. 38,854, Cary S. Kappel, Reg. No. 36,561, William C. Gehris, Reg. No. 38,156, Morey B. Wildes, Reg. No. 36,968, Robert J. Paradiso, Reg. No. 41,240, Erik R. Swanson, Reg. No. 40,833, Thomas P. Canty, Reg. No. 44,586, and all other registered attorneys and agents at Davidson, Davidson & Kappel, LLC, U.S. Patent and Trademark Office Customer Number 23280, my attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith; correspondence address: DAVIDSON, DAVIDSON & KAPPEL, LLC, 485 Seventh Avenue, 14th Floor, New York, New York 10018; Telephone: (212) 736-1940; Fax: (212) 736-2427.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

thereon.	
Full name of sole or first Inventor	Detlef CORDTS
Inventor's signature	
Date	
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Citizenship	German
	the second on attached shoot/s)

Full name of additional Inventor	Robert PETERS
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Date	
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DECLARATION AND POWER OF ATTORNEY

Full name of Full name of additional Inventor Christian MEYER additional Inventor Inventor's Inventor's signature signature Date Date Residence Henningsdorf, Germany Residence Post Office Am Yachthafen 6, Post Office Address D-16761 Henningsdorf, Germany Address Citizenship German Citizenship Full name of Full name of additional Inventor additional Inventor Inventor's Inventor's signature signature Date **Date** Residence Residence Post Office **Post Office** Address Address Citizenship Citizenship Full name of additional Inventor Full name of additional Inventor Inventor's Inventor's signature signature Date Date Residence Residence Post Office Post Office Address Address Citizenship Citizenship Full name of Full name of additional Inventor additional Inventor Inventor's signature Inventor's signature Date Date Residence Residence **Post Office** Post Office Address Address Citizenship Citizenship

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